

## PLACE OF BIRTH

## ARIZONA STATE BOARD OF HEALTH

1. County of Chila

District of \_\_\_\_\_

Town of Miami

or

City of \_\_\_\_\_

BUREAU OF VITAL STATISTICS  
ORIGINAL CERTIFICATE OF BIRTHState Index No. 175County Registrar No. 60Local Registrar No. 16No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_  
(If birth occurred in a hospital or institution, give its NAME instead of street and number)2. Full name of child Margarita Hernandez { If child is not yet named, make supplemental report, as directed.3. Sex of Child Female To be answered ONLY in event of plural births. 4. Twin, triplet or other. 4 5. No., in order of birth 4 6. Legitimate? yes 7. Date of birth Jan. 11-1925  
Month Day Year8. FATHER  
Full name Mariano Hernandez  
9. Residence (Usual place of abode) Miami, Arizona  
If non-resident, give place and state.10. Color or race Spanish  
11. Age at last birthday 34 (Years)12. Birthplace (city or place) Mexico City, Mex.  
(State or country)13. Occupation  
Nature of Industry Miner14. MOTHER  
Full maiden name Pietra Holquin  
15. Residence (Usual place of abode) Miami, Ariz.  
If non-resident, give place and state.16. Color or race Spanish  
17. Age at last birthday 21 (Years)18. Birthplace (city or place) Chila, New Mexico.  
(State or country)19. Occupation  
Nature of Industry Housewife20. Number of children of this mother (Taken as of time of birth of child herein certified and including this child.)  
(a) Born alive and now living 4  
(b) Born alive but now dead \_\_\_\_\_  
(c) Stillborn \_\_\_\_\_21. Were precautions taken against ophthalmia neonatorum? yes

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

I hereby certify that I attended the birth of this child, who was born at 5 A. m. on the date above stated  
(Born alive or stillborn)\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.  
Signature Cyril M. Brown M.D. (Physician or midwife).  
Address Miami, ArizonaGiven name added from a supplemental report \_\_\_\_\_  
Month, day, year \_\_\_\_\_

Registrar

Filed Jan 15, 1925 Nelson Brayton  
2/9, 1925 G.E. Wightman  
Local Registrar.  
County Registrar.

489-111-785

FOR BINDING  
WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD  
N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.